



<b>D1</b>	<b>NCCP Risk Register (J. Gleeson)</b> <ul style="list-style-type: none"> <li>• Minor edits to NCCP Risk Register Process were agreed</li> <li>• Risks were identified for further consideration and a risk related to Brexit impact was closed.</li> <li>• Consideration to be given to any new risks that need to be added to the register.</li> </ul>	
<b>E1</b>	<b>Cancer Screening (F Murphy)</b>	
	No update provided at this meeting	
<b>E2</b>	<b>Evidence and Quality Hub (E. O'Toole)</b>	
	E. O'Toole provided an overview of the High Risk Non-Melanoma Skin Cancer GP Referral Guideline (under Item A2 above)	
<b>E3</b>	<b>Cancer Intelligence (M. Cox)</b>	
	KPI update was circulated in advance of meeting <ul style="list-style-type: none"> <li>• Some improvement in KPIs is noted although resilience in the system remains a challenge.</li> <li>• Mitigation measures are in place e.g. extra clinics to help improve timeliness of treatment in those hospitals experiencing particular challenges.</li> </ul>	
<b>E4</b>	<b>Public Health, Community Oncology and Prevention/Early Detection (H. Burns)</b>	
	<ul style="list-style-type: none"> <li>• Hereditary Cancer Model of Care to be discussed at meeting on 15<sup>th</sup> March.</li> </ul> <p><b>Action:</b>  <b>Hereditary Model of Care to be shared with National Clinical Advisors NCCP in advance of discussion on March 15<sup>th</sup>.</b></p> <ul style="list-style-type: none"> <li>• BRCA needs assessment to be published at same time as Hereditary Cancer Model of Care.</li> </ul>	H. Burns
<b>E5</b>	<b>Cancer Nursing (T Hanan)</b>	
	<ul style="list-style-type: none"> <li>• NCCP are working with HSE communications to profile the work of the Acute Oncology Nursing services in upcoming media articles.</li> <li>• ANP meeting is scheduled for May 2023</li> </ul>	
<b>E6</b>	<b>Surgical Programme (A. Hill)</b>	
	<ul style="list-style-type: none"> <li>• Access to theatres for surgery for cancer patients continues to be prioritised</li> <li>• <b>NCIS –</b> <ul style="list-style-type: none"> <li>- noted that the breast forms are excellent.</li> <li>- Suggestion to carry out some work on streamlining the process for administrative staff</li> </ul> </li> </ul> <p><b>Action: Breast reconstruction- appropriate resourcing needs to progressed with Acutes and Plastic Surgery Programme, particularly in relation to DIEP (deep inferior epigastric perforator) breast reconstruction, including for women with BRCA variants.</b></p>	A.Hill/R.Ó Laoide/ T. McCarthy
<b>E7</b>	<b>Radiation Oncology (C. Faul)</b>	
	<ul style="list-style-type: none"> <li>• Main issues for radiation oncology services generally continue to be capacity and staffing which are impacting KPIs. Outsourcing is continuing.</li> <li>• The Covid management capacity plan will be re-introduced to improve KPIs</li> <li>• Options are being explored to mitigate impact on services</li> <li>• Two new Consultants have been appointed</li> </ul>	

	<ul style="list-style-type: none"> <li>Timeframe to complete professional registration with CORU impacting on availability of radiotherapy staff</li> <li>Marie Curie Professorship to commence late April 2023</li> </ul>	
<b>E8</b>	<b>Systemic Therapy Programme [Medical Oncology/Haemato-oncology] (P. Heckmann/M Keane)</b>	
	<p><b>Systemic Therapy Programme</b></p> <ul style="list-style-type: none"> <li>The Mazars report has been published. An implementation group is being established. NCCP are being considered for that working group. Work is on-going on identifying challenges outside of the HSE reimbursement process.</li> </ul> <p><b>Cancer Drug Management Programme</b></p> <ul style="list-style-type: none"> <li>Olaparib has been approved as monotherapy for the treatment of adult patients with metastatic castration-resistant prostate cancer and BRCA1/2-mutations (germline and/or somatic) who have progressed following prior therapy that included a new hormonal agent.</li> <li>Support documentation for patients and clinicians has been made available on the NCCP website.</li> </ul> <p><b>Genetics/Genomics (P Heckmann/T McCarthy)</b> Roche Field Safety Notice (FSN) re SP142 is on-going</p>	
<b>E9</b>	<b>National Cancer Information System (NCIS) – P. Heckmann</b>	
	<ul style="list-style-type: none"> <li>Roll-out is continuing. A number of hospitals are well advanced and a number of hospitals looking to implement the tumour conference functionality as a priority.</li> <li>Tumour Specific Datasets – the update to the Tumour Specific Datasets governance document was agreed.</li> <li>There is a follow-up module in NCIS that facilitates the integration of a nationally agreed standardised follow-up which can be modified on a patient basis.</li> <li>National Clinical Advisors to NCCP provided complimentary feedback on the NCIS system and NCCP team implementing the system. Benefits have been realised in the management of MDTs; there has been a high adoption rate across hospital sites.</li> <li>Opportunities for system enhancements were discussed to deliver a more streamlined experience for system users.</li> </ul>	
<b>E10</b>	<b>Cancer Networks (F Bonas)</b>	
	<ul style="list-style-type: none"> <li>Cancer Network meetings have been scheduled</li> </ul> <p><b>Action: Update will be provided on outcome of meetings at next EMT</b></p>	<b>P.Cafferty/F. Bonas</b>
<b>F</b>	<b>FOR INFORMATION</b>	
	n/a	
<b>G</b>	<b>AOB</b>	
	<p><b>Survivorship</b></p> <ul style="list-style-type: none"> <li>Work is underway to streamline survivorship protocols for patients.</li> </ul> <p><b>Action: L. Mullen to be invited to next EMT meeting to provide an update on Survivorship programme</b></p>	<b>L. Mullen</b>

**NCCP Tumour Conference SOP Guidance document**

It was agreed

- To publish the NCCP Tumour Conference SOP Guidance on the NCCP website
- To audit the number of tumour specific guidance documents developed by the NCCP Clinical Leads Groups. A further audit of implementation at hospital level may then be appropriate.

**DATE OF NEXT MEETING**

**Monday 17<sup>th</sup> April 2023 @ 10.30am**